

RECORD OF HEALTH AND SAFETY TRAINING

Attach certificates and complete required health and safety training by June 30, 2017

Name of Employee _____ Date of Employment _____

Health and Safety Training Topics	Training Date	Training Hours Received	Sponsoring Agency
Prevention and control of infectious diseases, including immunizations			
Administration of medication, with standards for parental consent			
Prevention of response to emergencies due to food and allergic reactions			
Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic			
Emergency preparedness and response planning for emergencies resulting from a natural disaster or a man-caused event			
Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants			
Precautions in transporting children, if applicable			
Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment			
Pediatric First Aid and Cardiopulmonary resuscitation (CPR) certification			
Prevention of sudden infant death syndrome and use of safe sleep practices			
Recognizing and Responding to Suspicions of Child Maltreatment			Prevent Child Abuse NC
Additional In-service Trainings	Training Date	Training Hours Received	Sponsoring Agency

I completed training in the topics listed above.

Signature of Employee _____ Date _____